## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO. 10/593818

PILING DATE

APPLICANT(S)

CLAIMS

| ND   DEP,   DEP,   ND   DEP,   DEP, | •        | ASF                                     | ILED                                      | AF                                 | ren  | ĀF   | TER                                       | LALIVIS  |   |                           | 1 50   | Title in   |    |
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|   | 38       |   | ************                              |                                    |  |  |   | 9/<br>#X |   |                           |  |  | ŀ  |
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| LL DEP. 4M 8 4M TOTALDER  | 19       | -                                       |   |                                    |  | *******  |   |          |   | ·                         |  |  |    |
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| LOEP 8 4M TOTALDER  | L WO.    |   | 4   | , 2                                | 4  |  | 4   |          |   | 1                         |  | L  |    |
|   | al det   |   | 4   | 8                                  |  |  | 44  | TOTALBER |   | 411                       |  |  |    |
| ABUS 10 BEER TOTAL CLARKS   | TAL      |   |   | 10                                 |  | -  |   | TOTAL    |   |                           | 1  |  | ľ  |

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